

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00000008091

1. Entity Name

PLANT CITY UNITED METHODISTS IN MISSION, INC.

FILED
Apr 19, 2001 8:00 am
Secretary of State

04-19-2001 90317 038 ****61.25

Principal Place of Business

303 N EVERS ST
PLANT CITY FL 33566

Mailing Address

303 N EVERS ST
PLANT CITY FL 33566

2. Principal Place of Business

202 W Reynolds Street

3. Mailing Address

802 W Dr MLK Jr Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Plant City, FL

City & State

Plant City, FL

4. FEI Number

59-3698345

Applied For

Not Applicable

Zip

33566

Country

USA

Zip

33566

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

TRINKLE, ROBERT S
121 N COLLINS ST
PLANT CITY FL

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME	P WOOTEN, PERRY	<input type="checkbox"/> Delete
STREET ADDRESS	303 N EVERS ST	
CITY-ST-ZIP	PLANT CITY FL 33566	
TITLE NAME	V KIRKWOOD, KEVIN	<input type="checkbox"/> Delete
STREET ADDRESS	303 N EVERS ST	
CITY-ST-ZIP	PLANT CITY FL 33566	
TITLE NAME	S WALDEN, CHARLOTTE	<input type="checkbox"/> Delete
STREET ADDRESS	303 N EVERS ST	
CITY-ST-ZIP	PLANT CITY FL 33566	
TITLE NAME	T WICKER, BILL	<input type="checkbox"/> Delete
STREET ADDRESS	303 N EVERS ST	
CITY-ST-ZIP	PLANT CITY FL 33566	
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME	D Wooten, Perry	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	303 N Evers St	
CITY-ST-ZIP	Plant City, FL 33566	
TITLE NAME	D Kirkwood, Kevin	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	303 N Evers St	
CITY-ST-ZIP	Plant City, FL 33566	
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME	P Musselwhite, Bill	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	303 N Evers St	
CITY-ST-ZIP	Plant City, FL 33566	
TITLE NAME	V Edwards, Bob	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	303 N Evers St	
CITY-ST-ZIP	Plant City, FL 33566	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/13/01 813 752-1757
Date Daytime Phone #

CR2E037 (10/00)